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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:
Stephen A. Johnston et al.

Serial No.: 09/448,330

Filed: November 22, 1999

For: EXPRESSION LIBRARY
IMMUNIZATION

Group Art Unit: 1648

Examiner: Unknown

Atty. Dkt. No.: UTSD:681/MBW

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REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

A corrected filing receipt is hereby requested in view of the error which appears in the original. For the convenience of the Patent and Trademark Office, attached is a photocopy of the original receipt on which the error has been noted in red.

There is an error in the filing date. Please delete "11/23/1999" and insert --11/22/1999--. In support thereof, enclosed is a copy of the Express Mail slip with the date of November 22, 1999, being the date that the application was mailed to the Patent and Trademark Office.

Because the error is not due to any error by Applicants, no fee is believed to be due in connection with the filing of this document. However, should any fee under 37 C.F.R. §§ 1.16 to 1.21 be deemed necessary for any reason relating to this document, the Assistant Commissioner

is hereby authorized to deduct said fee from Fulbright & Jaworski Deposit Account No.: 50-1212/10017688/MCB.

Please date stamp and return the enclosed postcard evidencing receipt of these materials.

Respectfully submitted,



Mark B. Wilson

Reg. No. 37,259

Attorney for Applicants

FULBRIGHT & JAWORSKI L.L.P.
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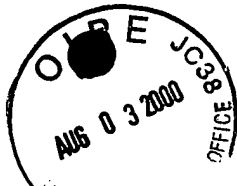
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FILING RECEIPT



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/448,330	11/23/1999 11/22/99	1648	445	UTSD:681	12	18	2

MARK B WILSON
ARNOLD WHITE & DURKEE
P O BOX 4433
HOUSTON, TX 772104433DOCKETED ☒ UPDATED ☐Previously ☐ Not Required ☐Appl. Info 11-23-99Reg./Grant Info Filing RecAction Required: Dec'dDate Rec'd: 3-20-00By: GR Checked: PRB**RECEIVED**

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Applicant(s)

STEPHEN A. JOHNSTON, DALLAS, TX ;
MICHAEL A. BARRY, CARROLLTON, TX ;
WAYNE C. LAI, RICHARDSON, TX ;**RECEIVED**FULBRIGHT & JAWORSKI LLP
AUSTIN, TEXAS

Continuing Data as Claimed by Applicant

THIS APPLICATION IS A DIV OF 09/001,157 12/30/1997 PAT 5,989,553
WHICH IS A DIV OF 08/421,155 04/07/1995 PAT 5,703,057

MAR 21 2000

Foreign Applications

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If Required, Foreign Filing License Granted 12/22/1999

REC'D HOWREY SIMON ARNOLD & WHITE

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MAR 20 2000

Title

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Preliminary Class

424

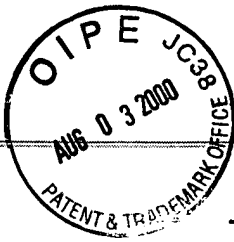
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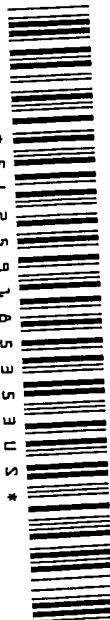
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Bib Data Sheet

CONFIRMATION NO. 4922

SERIAL NUMBER 09/448,330	FILING DATE 11/22/1999 RULE	CLASS 424	GROUP ART UNIT 1648	ATTORNEY DOCKET NO. UTSD:681
APPLICANTS STEPHEN A. JOHNSTON, DALLAS, TX; MICHAEL A. BARRY, CARROLLTON, TX; WAYNE C. LAI, RICHARDSON, TX;				
** CONTINUING DATA ***** THIS APPLICATION IS A DIV OF 09/001,157 12/30/1997 PAT 5,989,553 WHICH IS A DIV OF 08/421,155 04/07/1995 PAT 5,703,057				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/22/1999			** SMALL ENTITY **	
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u> </u> Examiner's Signature <u> </u> Initials <u> </u>		STATE OR COUNTRY TX	SHEETS DRAWING 12	TOTAL CLAIMS 18
		INDEPENDENT CLAIMS 2		
ADDRESS MARK B WILSON ARNOLD WHITE & DURKEE P O BOX 4433 HOUSTON, TX 772104433				
TITLE EXPRESSION LIBRARY IMMUNIZATION				
FILING FEE RECEIVED 445	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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ADDRESS STEVEN L. HIGHLANDER FULBRIGHT & JAWORSKI L.L.P. 600 CONGRESS AVENUE SUITE 2400 AUSTIN, TX 78701				
TITLE EXPRESSION LIBRARY IMMUNIZATION				
FILING FEE RECEIVED 445	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	